

Attorney Docket No. 054666-5003

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled PATIENT IDENTIFICATION CARD AND METHOD FOR HIPAA COMPLAINT CHECK-IN, the specification of which:

is attached	herete.			
was filed o Preliminary An	n October 30, 2003 as Aj nendment filed herewith.	pplication Serial No 10/697,79	l and wa	s amended in a
	PCT Application	Entering National Phase		
was filed on as PCT Internations and was amended on (if applicable).		as PCT International Application (if applicable).	l Application No.	
I hereby state that I have including the claims, as	e reviewed and understan amended by any amendn	d the contents of the above-idement referred to above.	ntified sp	pecification,
I acknowledge the duty to Code of Federal Regulat	to disclose information wions, § 1.56(a).	thich is material to patentability	y as defin	ed in Title 37,
abbusenout of the Dateur	UL HIVORIDE 5 CERTIFICATE I	e 35. United States Code, §§ 1 isted below and have also iden ing a filing date before that of	4-5-4 hal	A
Prior Foreign Application(s)			Priority Claimed	
(Number)	(Country)	(Day/Month/Year Filed)	Yes	No
I hereby claim the benefit application(s) listed below	under Title 35, United S v.	itates Code, § 119(e) of any Ur	nited State	es provisional
(Application Number)	(Filing Date)			
hereby claim the benefit	under Title 35, United S	tates Code, § 120 of any Unite	d States s	pplication(s)

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listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code. § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56, which became available between the filing date of the prior application and the national or PCT international filing date of this application.

(Application Serial No.)

(Filing Date)

(Status - patented, pending, abandoned)

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Tradernark Office connected therewith:

Daniel H. Golub Reg. No. 33,701

Address all telephone calls to Daniel H. Golub at telephone number 215,963,5055.

Address all correspondence to <u>Daniel H. Golub</u>

Morgan, Lewis & Bockius LLP

1701 Market Street Philadelphia, PA 19103-2921

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 13 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor's Signature

Full Name of sole or first inventor

Residence:

Post Office Address:

Citizenship:

Inventor's Signature

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U.S.A.

Date